CERTIFICATION OF NOTICE UNDER Pa. O.C. Rule 10.5

REGISTER OF WILLS

| Name of Decedent: | | | | |
|-------------------------------------|-----------------------------|----------------|----------------------------|---------------|
| Date of Death: | Date of Death: File Number: | | | |
| Date Letters Granted: | | | | |
| | | | | |
| To the Register: | | | | |
| I certify that Notice of Estate A | Administration re | equired by Pa | a. O.C. Rule 10.5 of the O | rphans' Court |
| Rules was served on or mailed | l to the following | g beneficiarie | s of the above-captioned | estate on |
| | : | | | |
| N. | A 11 | | | |
| Name: | <u>Addre</u> | <u>:ss</u> : | | |
| | <u> </u> | | | |
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| (If more space is needed, attac | ch senarate sheet | ·) | | |
| | _ | | | |
| Notice has now been given to | all persons entitl | ed thereto un | ider Pa. O.C. Rule 10.5 ex | cept: |
| | | | | |
| Date | | Capacity: | Personal Representative | Counsel |
| Corporate Fiduciary (if applicable) | | | | |
| | | | | |
| Name of Corporate Fiduciary | | Name of Perso | n | |
| Name of Representative and Title | | Address | | |
| Address | | | | |
| | | | | |
| m.ll. | | Telephone | | |
| Telephone | | Email | | |
| Email | | | | |
| | | | | |
| Signature of Officer/Representative | | Signature of P | erson | |